

SIGNS MATTER: EARLY DETECTION GUIDE FOR IMPLEMENTATION



**American
Foundation
for Suicide
Prevention**



RUTGERS
University Behavioral
Health Care

INTRODUCTION

This guide is intended to aid with the effective implementation of the *Signs Matter: Early Detection* online suicide prevention program. The program may satisfy legislative requirements in some states that require professional development for school personnel. It is a 2-hour education program.

Schools and Youth Serving Organizations

The information included in this program has relevance for administrators, educators and other adults in the lives of children. It is important to understand that we all have a responsibility for assuring the well-being of participants not only in school settings, but also in athletic clubs, as well as faith-based and community organizations. Whenever and wherever our children and teenagers participate in group activities, adults should be aware of talk, behavior and actions that might signify increased risk for suicide.

Non-Public Schools

The well-being of our children and adolescents is the responsibility of all adults. In addition to those who attend public schools, the information included in *Signs Matter* is relevant to charter schools, non-public (parochial and approved schools for those with disabilities), and public schools.

Knowing that a student may possibly take his/her own life is one of the most frightening things a trusted adult in the education system can face. The fact that suicide is the second-leading cause of death for youth makes the issue even more real. Additionally, mental health issues pose barriers that impede the educational success of our students at increasingly high rates. When equipped with the ability to identify signs of suicide risk and other mental health issues, educators and support staff can play a critical role in addressing this problem and provide a valuable component of your school's comprehensive mental health wellness plan.

Signs Matter: Early Detection was developed based on a combination of science and best practices. The program presents scientifically based information on a variety of topics related to youth suicide, alongside best practice recommendations drawn from experts in the mental health and education fields. Science sheds light on key questions of risk and protective factors for youth suicide, as well as the most common behavioral presentations expressed by at risk youth. Recommendations for school personnel roles, support, referrals, and interventions are drawn from best practices of educational and mental health professionals.

Foremost, educators and other school personnel are not expected to be mental health experts—but it is important that they understand and recognize the signs that a student is at risk for suicide or other mental health concerns. *Signs Matter: Early Detection* training will show educators how and when to express concern and refer students to counseling staff or administration.

This online training program can be used and adapted to fulfill the professional development mandate of your school or organization. The training’s concrete approach is designed to teach skills and instill confidence in its life-saving approach to working with young people. This administrator’s guide provides suggestions for an effective rollout to staff, enhanced learning strategies, and options for alternative delivery formats.

OVERVIEW OF THE *SIGNS MATTER: EARLY DETECTION* ONLINE PROGRAM

Signs Matter: Early Detection is designed to educate those who interact with young people, to spot the warning signs of suicide risk and mental health issues in order to connect them to the proper resources. It shows educators how and when to express concern and refer students to counseling staff, nurses, child study team or administration.

The training includes:

- A close look at the most common mental health problems and how they present in a school (and other youth organization settings)
- Scenarios with children and adolescents of various ages to help you better identify students in need of support
- Opportunities to practice how to respond and connect a young person to the appropriate resources
- An online assessment tool to ensure that all participants have gained an understanding of the key concepts
- Resources for understanding a school’s role in suicide prevention
- Review of important legal requirements for schools

IMPLEMENTING THE *SIGNS MATTER* ONLINE PROGRAM

Research informs us that early identification and intervention is the most effective means for connecting young people to mental health services and preventing suicide deaths. Given the high stakes for successful outcomes in administering this important mental health awareness and suicide prevention training program, there are key considerations that are

crucial for effective implementation. The topics of suicide and mental health disorders may be difficult for participants due to such factors as stigma, lack of knowledge and beliefs in common myths. We know that in any population of staff, there are likely to be individuals who know someone or have been impacted personally. Therefore, it is important to consider the needs of individuals who may be negatively affected and consider a plan for their emotional safety. The following recommendations are designed to address these issues and help to lay the foundation for an effective roll-out of the *Signs Matter* training.

It is suggested that all members of your school, district, or other organizations' leadership team, counselors and or child study team view the *Signs Matter* online program. This will provide an opportunity for administrators and mental health professionals who know their staff well, to consider their unique needs. With this information, thoughtful consideration can be given to decisions on the most appropriate delivery method to ensure a safe and effective learning environment. Options for delivery methods may include:

- Individuals complete the online program independently
- Facilitator Led - Individuals watch together in groups with guided discussion
- Hybrid – Participants watch parts together, complete parts independently
 - Staff are provided with two or more choices for completing the program: independently, with a facilitator, or as a hybrid

The following are recommendations for a preliminary roll-out of the program:

- Introduce at an in-person staff meeting (faculty, department, etc.)
- Show trailer: [Trailer - Signs Matter: Early Detection](#)
- Provide an overview of the *Signs Matter: Early Detection* online program (see overview)
- Consider providing local, state, or federal information about suicide and mental health and/or allow for discussion of any school/organization specific issues or concerns
- Inform staff of timelines and if this is a mandated training requirement
- Discuss learning objectives
 - Identify warning signs of suicide and other mental health concerns
 - Learn and practice how to respond
 - Understand your school's procedures for reporting and connecting students to support
 - Know who to report concerns to when you identify warning signs
 - Discuss use of technology and troubleshooting measures

REACHING ALL AUDIENCES

As stated earlier, suicide is a multi-faceted and complex issue and it will take an entire village to save lives. Therefore, it is advisable that consideration be made with regard to the training needs of non-certified staff such as:

- Para-professional (teacher assistants, aides, etc.)
- Custodial
- Clerical staff
- Administrative assistants
- Bus Drivers and aids
- Cafeteria staff
- Adult volunteers
- Coaches
- Contracted services providers

Signs Matter can be modified to fit the training needs of those populations. Sections may be used to create shorter training modules, language can be modified for non-education personnel, and guidance provided regarding who to report to with concerns about a student. For every staff member in a school whose understanding of suicide and mental health wellness is increased, they assume other roles in the community as adults, coaches, scouts' leaders, etc. Addressing this broad audience expands the effectiveness of suicide prevention within the community of suicide as a public health issue.

POLICIES AND PROCEDURES

An integral part of this training is to inform staff of key elements regarding your district or organization's policies and procedures and their specific responsibilities regarding reporting.

Guidance for development of these crucial procedures can be found in the *Model School District Policy on Suicide Prevention* developed in cooperation by the American Foundation for Suicide Prevention, the American School Counselor Association, the National Association of School Psychologists and The Trevor Project.

It is recommended that staff be provided with a written copy of your school or organization's procedures that include specific responsibilities and action steps for general staff as well as those responsible for assessment and follow-up. Having clear, written procedures can be a stabilizing factor and can contribute to the ability of individuals to take the appropriate actions to ensure a student's safety. Providing information regarding varied staff members' roles in the process further contributes to everyone's understanding and ability to effectively carry out their responsibilities.

Key information and instructions to include when training staff regarding their specific responsibilities if they see warning signs include:

- Provide multiple options for who to report to with concerns
- Provide instructions for who to contact with information outside of school hours
- Procedures for ensuring safety

Additionally, differentiate procedures for referring a student due to general concerns about a student's mental health and those requiring immediate action due to warning signs.

SUGGESTIONS FOR IMPLEMENTING AS A HYBRID (self-study and group discussion)

Each of the video scenarios in *Signs Matter* was developed with the intent to prompt critical thinking and discussion amongst viewers, and consideration of how participants would respond to similar issues that may occur. The scenarios include examples of common mistakes that may occur in school district responses to students in need. The course includes expert commentary from mental health professionals and practitioners following each video scenario. A separate section of *Signs Matter* provides a detailed discussion of legal issues that arise in each scenario.

In order to fully leverage *Signs Matter* to promote meaningful professional growth, school districts are encouraged to plan follow up discussions with all staff using the scenarios to achieve the following important objectives:

1. Identify warning signs for students at risk for suicide
2. Apply appropriate district procedures to ensure student safety


Since the course includes video scenarios at the elementary, middle school and high school levels, follow up discussions should include focused grade level discussions and can be differentiated for all types of staff members. The following basic questions can be used with all groups of participants including support staff. (Note: Facilitators may choose to use the more detailed questions for analysis with counselors, teachers, school social workers, psychologists, and administrators.)

Facilitators may wish to use a handout to assist participants in identifying the warning signs in the scenarios. Additionally, your district may choose to provide a written handout outlining specific procedures for staff to follow for reporting a student at risk.

- What warning signs and risk factors are evident in this scene
- (see graphic below)
- Given our school's procedures, what would be your next steps?
- How would you express concern to the student?
- How would you ensure that parents are notified as needed?
- What type of help would you offer?

- How might you later follow up with student?
- Additional thoughts and/or questions?

Suicide Warning Signs



TALK


Experiencing unbearable pain

Being a burden to others Killing themselves

Feeling trapped

Having no reason to live

BEHAVIOR



Increased use of alcohol or drugs

Withdrawing from activities

Giving away prized possessions

Isolating from friends & family


Looking for a way to kill themselves, such as searching online for materials or means

Sleeping too little or too much

Acting recklessly

Visiting or calling people to say goodbye

Aggression



MOOD

Depression


Irritability Loss of interest

Anxiety

Rage

Humiliation

afsp.org/signs



American Foundation
for Suicide Prevention

GUIDELINES FOR DETAILED FOLLOW UP DISCUSSIONS

Each of the video scenarios in *Signs Matter* was developed with the intent to prompt critical thinking and discussion amongst viewers, and consideration of how participants would respond to similar issues that may occur. The scenarios include examples of common mistakes that may occur in school district responses to students in need. The course includes expert commentary from mental health professionals and practitioners following each video scenario. A separate section of *Signs Matter* provides a detailed discussion of legal issues that arise in each scenario.

In order to fully leverage *Signs Matter* to promote meaningful professional growth, school districts are encouraged to plan follow up discussions with staff. Since the course includes video scenarios at the elementary, middle school and high school levels, those follow up discussions should include focused grade level discussions. Group facilitators are encouraged to review the analysis that follows each scenario and the legal analysis prior to leading group discussions. As a further resource to assist facilitators, listed below are key questions that can be used to facilitate group discussions.

Elementary Video

Q: What signs were exhibited by Jason that indicate a need for follow up by school staff?

A: Recurring stomach aches, need to see the nurse, constantly checking his bookbag, ongoing need to call his mother, isolation on the playground, reluctance to speak in class, large number of absences, prior similar issues cited in Kindergarten and first grade.

Q: How effective was the school district's response to Jason?

A: The principal was unaware that certain red flag issues noted above had been occurring in kindergarten and first grade, which indicates a breakdown in information sharing by the kindergarten and first grade teachers. After being made aware of issues by the second grade teacher, the principal took a week to follow up and speak with the nurse, and then circle back to Jason's teacher to develop a response plan. Response was delayed, hampering its effectiveness. The principal did appropriately recognize the need to reach out to the parent and have a follow up discussion, albeit after an improper delay. The school nurse was not proactive, and only informed the principal about the pattern of stomach aches when the principal sought her out to discuss Jason. The nurse should have been proactive and informed the principal earlier. The second-grade teacher took the initiative to speak with the kindergarten and first grade, and to seek out the principal to express concerns regarding Jason. The teacher also took the time to directly express his concern for Jason's well-being to Jason, and to make sure he accompanied him to the nurse. The teacher was also open to being part of a follow up discussion with the parent. However, even the second-grade teacher appears to have waited longer than he should have before making the principal aware of his concerns.

Q: What policies and procedures should be in place to ensure more effective sharing of information than we saw in this video?

A: Clear expectations should be established and disseminated to all staff by the district for when and how to share information with the school principal and/or school counselor when certain red flag issues occur regarding a particular student. In this scenario, there were a number of concerning issues in Jason's interactions with the kindergarten and first grade teachers and the school nurse that related to his mental health (signs of anxiety, compulsive behavior) and physical health (recurring stomach aches, large number of absences), as well as his inability to develop friendships with other students. School administrators should have a clear expectation to follow up with the student and parent in a more timely manner than we saw in this video.

Q: What follow up steps should be taken in this scenario?

A: The district should work closely with Jason's parents to develop a game plan to address his needs. This may involve a school counselor working with Jason on developing social skills and building a network of friends, looking more closely at Jason's potential mental health issues and involving district staff with expertise in mental health issues in assessing Jason's needs and determining whether or not Jason may need to be evaluated for an IEP or 504 plan, working with the parents on strategies for helping Jason lessen his anxiety related to separation from his mother, and making the parents aware of outside community resources that may be helpful.

Q: Given the much lower incidence of attempted suicide and reported suicidal ideation at the elementary level, why is it important to have this type of discussion at the elementary level?

A: While the incidence of suicide and suicidal ideation are lower at the elementary level, such issues do still occur in this age group. In addition, the failure to identify and address emerging mental health issues at this time could lead to far more serious issues down the road.

Middle School Video

Q: Analyze the strengths and weaknesses in the teacher's response when he first witnessed the incident in the hallway involving Chase and the other students.

A: The teacher acted immediately to stop the inappropriate behavior and made it clear to all involved that this was not acceptable behavior in the school. He also spoke directly with Chase and asked him if there had been any prior issues with these particular students while expressing empathy. In addition, he took the time to take Chase directly to the school counselor, rather than just suggesting that Chase go on his own, which he may or may not do. On the negative side, the teacher should not have been having a sensitive discussion with Chase regarding the incident or prior issues right in the hallway, where others could overhear. He also should not have simply told the three students who targeted Chase to walk together to the principal's office. That would give the students time to try and develop their own version of

events and could make the ensuing investigation more difficult. Instead, a protocol should have been in place so that another staff member could come and escort the students to the principal's office. The teacher also should not have directly said to the school counselor, in front of Chase, that he witnessed other students bullying and harassing Chase, since those are legal conclusions that should only be reached after an investigation is completed.

Q: Analyze the strengths and weaknesses in the principal's response.

A: The principal acted appropriately in calling the parents involved about the incident that occurred to inform the parents that an investigation was underway. The principal also acted promptly to interview students involved in targeting Chase in the incident. However, the principal should have taken the time to speak with the teacher and the counselor prior to calling Chase's parents, since Chase does not want his parents to know about his sexual orientation and the principal could inadvertently share that information. The principal also should have separated the three students while they were waiting to be questioned, so they would not have time to coordinate their stories. It is also a best practice to gather written statements from students involved in an incident prior to questioning the students.

Q: Analyze the strengths and weaknesses in the counselor's response.

A: Given that Chase confided in the counselor about an ongoing pattern of harassing behavior over a two-year period, and the apparent emotional harm it had caused, it was appropriate for the counselor to raise the issue of suicidal ideation with Chase. Once Chase confided he had such thoughts, it was appropriate for the counselor to follow up and ask if Chase had considered using any particular means to act upon his suicidal ideation. The counselor also was justified in trying to help Chase understand that he is not alone, and other students have also been through similar difficult situations. Finally, the counselor let Chase know that her office was a safe space for him to express his concerns and that she was committed to working with him to support his wellbeing. On the other hand, the counselor could have chosen her words more carefully in how she explored the extent to which Chase may have moved from suicidal ideation to actual planning. The counselor also may have created a perception that the school is unsafe and cannot protect Chase, when she told Chase he would be surprised at the number of students who have been similarly targeted and when she said that school is not a safe place when you are being targeted by other students. These comments could be used in any ensuing litigation to increase the district's liability. The *Signs Matter* attorney commentary offers appropriate, alternative language that the counselor could use.

Q: What follow up steps should be taken in this scenario?

A: Since Chase has expressed suicidal ideation, the school district needs to ensure that a formal risk assessment is conducted, and a determination is made as to whether or not Chase needs to be referred out for a medical examination by a licensed doctor. The principal would also be required, in this scenario, to conduct a much broader investigation, since Chase has indicated that he may have been the victim of bullying for the past two years, not just in the one incident

in the hallway. While the teacher informally checks in with Chase in the scenario, a more formalized plan should be implemented to support Chase, which would likely include regularly scheduled check-ins with the school counselor.

Q: What policies and procedures should be in place to ensure a more effective response if a similar issue arose in our school?

A: The district should have a clearly defined risk assessment protocol. Counselors should be trained on how to have appropriate conversations with students that allow for expressions of empathy without creating potential legal liability. A protocol should also be in place for conducting student investigations that includes timely collection of written student statements on day one, separating students who may have been involved in an incident prior to questioning, and clear lines of communication between the principal and other staff (in this case the counselor and teacher) to ensure the principal has proper information prior to calling the parents, to avoid any accidental situations such as “outing” a student to his parents.

High School Video

Q. What issues is Meghan struggling with in this scenario?

A. She has an eating disorder, issues with alcohol abuse and an emerging depressive disorder. She is also dealing with having been rejected from a prestigious summer dance program.

Q. What signs were there that should have been red flags?

A. Some of Meghan’s friends were aware that she was vomiting after eating. Some friends may also have been aware of her emerging issues with alcohol. She also expressed suicidal ideation to friends after being rejected for a summer dance program. Meghan’s parents were concerned that she had become irritable, that she was losing weight, and that she was isolating herself in her room. Her coach had noticed that she was not eating at lunch. Presumably the coach would have also noticed if she had lost an appreciable amount of weight. Her coach also should have noticed if she was having trouble concentrating during practice and if she was trying to work through an injury. The coach also should have been aware of the importance that a high achieving student like Meghan would place on being accepted into a prestigious summer dance program. Since she had the same coach for three years, the coach should have also noticed if there were significant changes in Meghan’s demeanor.

Q. How is it possible for a student like Meghan, who is a gifted dancer and high achieving student, to be struggling in so many areas for so long, without adults in the school setting knowing?

A. Some adults will mistakenly assume that popular, high achieving and athletically gifted students have it all and do not have any underlying mental health issues. Some students are very good at wearing a mask of success for long periods of time. Adults can sometimes view issues that teenagers are working through with adult eyes, and assume that the teenager is able to put issues in proper perspective, such as not being accepted into a particular dance program, in the same way that an adult would do.

Q. What follow up steps should be taken in this scenario?

A. The district should conduct a risk assessment for Meghan and determine if she needs to be referred out for a medical examination. Meghan and her family should be provided with information on available resources that can assist with addressing a range of issues, including eating disorder, substance abuse and depression. A support plan should be developed for Meghan in consultation with her parents. That plan will likely include follow up counseling sessions and check-ins at school by a school counselor, having the coach and other trusted adults in the school also checking in on Meghan, having Meghan participate in a comprehensive drug and alcohol counseling program, and ensuring that there is proper follow up by Meghan's family with outside resources as needed to address her eating disorder, substance use, depression and any related issues.

Q: What policies and procedures should be in place to ensure a more effective response if a similar issue arose in our school?

A. Training should be provided for all coaches on issues of mental health and suicidal ideation, and coaches should be provided with a clear protocol on who to go to (e.g., counselor, administrator) if they are seeing issues that concern them regarding one of their athletes. Parent education is also critical, since many parents will see signs in the home that would be extremely important for school officials to have, as we saw in this scenario. On a broader front, districts should consider a concerted campaign to destigmatize issues of mental health and send the message that students are not alone in struggling with the difficult issues like those that Meghan had, and that it is not a sign of failure or weakness to ask for help. The district should also examine its current educational program and counseling program, to determine if there are additional steps that can be taken to help students with developing resiliency.

A 5 YEAR PLAN FOR TRAINING

Several states have legislated plans for suicide prevention training. For example, the state of New Jersey requires a two-hour suicide prevention training every five years. It is important that schools be aware of their legislative requirements for suicide prevention education and adjust their training frequency to meet minimum standards.

However, the need for attention to student mental health and the prevention of death by suicide are issues that warrant ongoing, and often annual, professional development efforts. Therefore, instead of a “one and done” approach, these suggestions are offered for ongoing reinforcement to complement your prevention plan.

- Plan for annual mini-refresher trainings such as:
 - 15-20-minute presentation of warning signs and follow-up actions at a faculty meeting.
 - Counselors or CST members can provide mini refresher trainings in department meetings, professional learning communities, I&RS team meetings, etc.
- Display and rotate written materials for staff regarding mental health issues and suicide prevention in faculty areas, work areas, rest rooms, etc.
- Disseminate information for staff via newsletters, email, and mailboxes that reflect current needs or concerns. *For example: Inform staff that the weeks leading up to holidays can negatively impact students who struggle with depression, family issues, etc. and encourage extra vigilance. Provide reminders about added stressors during exams and remind staff about the referral process to counselors.*
- Evaluate assessment procedures with administrators and counseling staff on an annual basis or through debriefing as needed. Conduct tabletop scenarios to identify possible problem areas and to keep skills current.
- Require new staff to complete Signs Matter

BEYOND SIGNS MATTER: ADDITIONAL TRAINING AND RESOURCES

For additional information, training and technical assistance on supporting mental health in schools, suicide prevention, risk assessment and crisis response and trauma informed schools, contact:

The American Foundation for Suicide Prevention
AFSP.org

CRISIS RESOURCES

National Suicide Prevention Lifeline
1 800 273-TALK (8255)

Crisis Text Line

Text “TALK” to 741741

MENTAL HEALTH AND SUICIDE PREVENTION RESOURCES

Preventing Suicide: A Toolkit

This toolkit assists schools and school districts in designing and implementing strategies to prevent suicide and promote behavioral health. The toolkit includes tools to implement a multifaceted suicide prevention program that responds to the needs and cultures of students.
Preventing Suicide: A Toolkit

After a Suicide: A Toolkit for Schools

This newly revised resource (2018) developed by the American Foundation for Suicide Prevention and The Suicide Prevention Resource Center provides information for school administrators and other school staff who wish to implement a coordinated response to the suicide. The toolkit provides information on how best to communicate and support the school community and manage the crisis response. Also found in the toolkit is information on helping students cope, communicating with parents, working with the community, and engaging external resources for support.

While designed primarily for school personnel, the toolkit also contains useful guidance for parents and communities. <https://afsp.org/our-work/education/after-a-suicide-a-toolkit-for-schools/>

Suicide Prevention Resource Center

The Suicide Prevention Resource Center (SPRC) is a federally supported resource center devoted to advancing the implementation of the National Suicide Prevention Strategy. It provides resources and information to assist schools, communities and other organizations in developing their own suicide prevention strategies. sprc.org

Columbia Suicide Severity Rating Scale

The Columbia Protocol, also known as the Columbia-Suicide Severity Rating Scale (C-SSRS), provides a risk monitoring protocol that can be used as part of a school’s suicide prevention strategy. It is Research based, provides for free online training and practice, and assists schools in maintaining consistency and accountability.

Reentry Planning <http://cssrs.columbia.edu/the-scale-in-action/schools/>

Suicide Safe

Suicide Safe is a free mobile app that helps mental health providers integrate suicide prevention strategies into their practice and address suicide risk among their students. The Suicide Safe app is based on the Substance Abuse Mental Health Services Administrations (SAMHSA) Suicide Assessment Five-Step Evaluation and Triage. [SAMHSA.GOV](https://www.samhsa.gov)

Child Mind Institute

The Child Mind Institute is committed to helping educators identify and respond effectively to children with signs of a mental health or learning disorder. This site provides information for educators regarding the impact of specific disorders and strategies to support functioning in school. <https://childmind.org/>

RESOURCES FOR SERVING THE NEEDS OF LGBTQ STUDENTS

GLSEN

This site provides resources for educators to ensure that LGBTQ students are able to learn and grow in a school environment free from bullying and harassment. This website provides resources to help transform our nation's K-12 schools into the safe and affirming environment all youth deserve. www.GLSEN.org

The Trevor Project

The Trevor Project is the leading national organization providing crisis intervention and suicide prevention services to lesbian, gay, bisexual, transgender, queer & questioning (LGBTQ) young people under 25. Educator resources on this site include information on The Lifeguard Workshop, a free online learning module with a video, curriculum, and teacher resources for middle school and high school classrooms. The Trevor Project's Trainings for Professionals include in-person Ally and CARE trainings designed for adults who work with youth. These trainings help counselors, educators, administrators, school nurses, and social workers discuss LGBTQ-competent suicide prevention. www.thetrevorproject.org/education/

Trans Lifeline

Trans Lifeline is a national trans-led 501(c)(3) organization dedicated to improving the quality of trans lives by responding to the critical needs of our community with direct service, material support, advocacy, and education. Our vision is to fight the epidemic of trans suicide and improve overall life-outcomes of trans people by facilitating justice-oriented, collective community aid. translifeline.org

DRUG AND ALCOHOL PREVENTION

The National Institute on Drug Abuse

This site provides educators with the latest science-based information, classroom lessons and activities, and resources for talking with kids about the impact of drug use on health. drugabuse.gov

BULLYING AND SUICIDE RESOURCES

Suicide and Bullying Brief

This issue brief from the Suicide Prevention Resource Center examines the relationship between suicide and bullying among children and adolescents, with special attention to lesbian, gay, bisexual, and transgender (LGBT) youth. It also explores strategies for preventing these problems.

Link to PDF - [Suicide and Bullying Issue Brief](#)

The Olweus Program

Olweus (pronounced OI-VAY-us) is a comprehensive approach that includes schoolwide, classroom, individual, and community components. The program is focused on long-term change that creates a safe and positive school climate. www.violencepreventionworks.org

National Eating Disorders Association

The National Eating Disorders Association (NEDA) is the largest nonprofit organization dedicated to supporting individuals and families affected by eating disorders. NEDA supports individuals and families affected by eating disorders, and serves as a catalyst for prevention, cures and access to quality care. nationaleatingdisorders.org

The Jed Foundation

The Jed Foundation's Mental Health Resource Center provides essential information about common emotional health issues and shows teens and young adults how they can support one another, overcome challenges and make a successful transition to adulthood.

<https://www.jedfoundation.org/>

Resources for Working with Homeless Students

School House Connection is a national non-profit organization working to overcome homelessness through education. <https://www.schoolhouseconnection.org/>